

# TRAVEL EXPENSE CLAIM

See Instructions and Privacy

Statement on Reverse Side

Page 1 of 1

STD 262 (REV 10/92)

CLAIMANT'S NAME Clark Blanchard		SSAN OR EMPLOYEE NUMBER		DEPARTMENT Governor's Office	
POSITION Director of Advance	CB/D NUMBER	DIVISION OR BUREAU Advance		INDEX NUMBER	
RESIDENCE ADDRESS		HEADQUARTERS ADDRESS State Capitol		TELEPHONE NUMBER	
CITY	STATE	ZIP	CITY	STATE	ZIP
Sacramento		CA	95814		

MONTH/YEAR 5/10		LOCATION WHERE EXPENSES WERE INCURRED	LODGING	MEALS			INCIDENTALS	TRANSPORTATION				BUSINESS EXPENSE	TOTAL EXPENSES FOR DAY
DATE	TIME			BREAKFAST	LUNCH	DINNER		COST OF TRANS.	TYPE USED	CARFARE, TOLLS, PARKING	PRIVATE CAR USE		
										MILES	AMOUNT		
06-May	10:30 AM	Sacramento								24	12.00		12.00
07-May	1:30 PM	Sacramento								24	12.00		12.00
12-May	N/A	Sacramento									0.00	133.00	133.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
											0.00		0.00
SUBTOTALS			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48	24.00	133.00
COLUMN CODE (ACCTG. USE ONLY)													
CLAIM TOTAL												\$157.00	

PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts when required)

06-07 May: To and from SMF to pick up and drop off colleague.

12-May: Cost of reserving parking meters for media parking for Governor's 2010 Budget May  
Revise Press Conference.

NORMAL WORK HOURS

PRIVATE VEHICLE LICENSE NUMBER

5PGJ014

MILEAGE RATE CLAIMED

0.5

AGENCY ACCOUNTING OFFICE

USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

241029

I HEREBY CERTIFY, That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used and if mileage exceeds the minimum rate, I certify the cost of the operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage

CLAIMANT'S SIGNATURE

5/12/10

SIGNATURE OF OFFICER APPR

REL AND PAYMENT

DATE

5/17/10

TURE OF TITLE OF AUTHORITY FOR SPECIAL EXPENSES